

Language Access Under the Affordable Care Act

6th Annual Hawai'i Conference on
Language Access

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Roadmap

- Demographic profile of LEP individuals in the U.S.
- Statutory and regulatory requirements under the ACA
- What Federal resources are currently available to LEP consumers?
- Policy recommendations

Demographic profile of LEP individuals in the U.S.

LEP Demographics

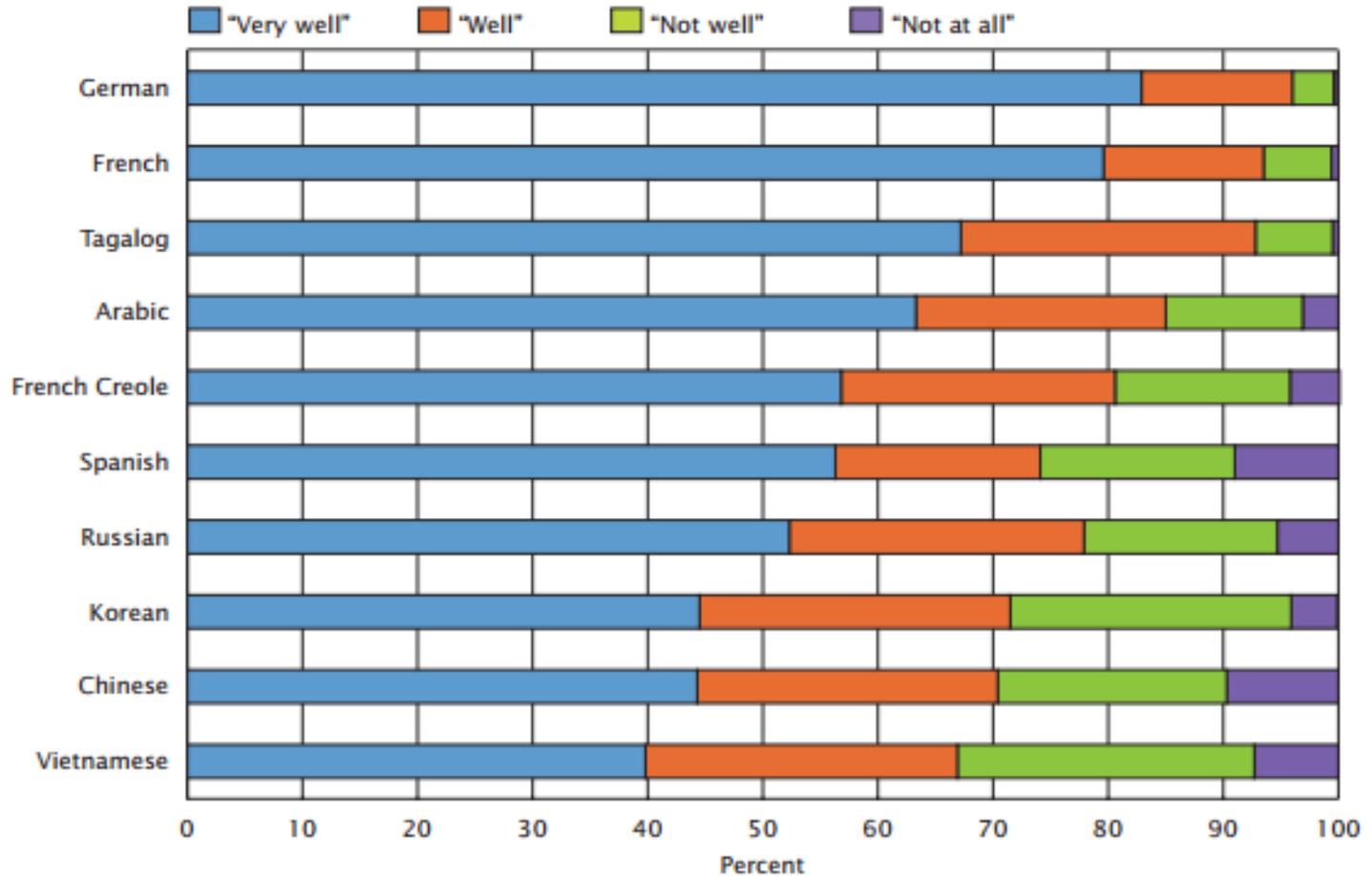
- Over 60 million people speak a language other than English at home (21% of the population)
- Over 25 million (9 % of the population) speak English less than “very well,” and may be considered LEP
- 8.5 million children under age 19 live in a household with at least one LEP parent

SOURCES: American Community Survey Report, Language Use in the United States: 2011 (August 2013). American Community Survey, 2011, Table DP02, SELECTED SOCIAL CHARACTERISTICS IN THE UNITED STATES, 2009-2011 American Community Survey 3-Year Estimates

Figure 2.

English-Speaking Ability for the Top Ten Languages: 2011

(Population 5 years and over who spoke a language other than English at home)



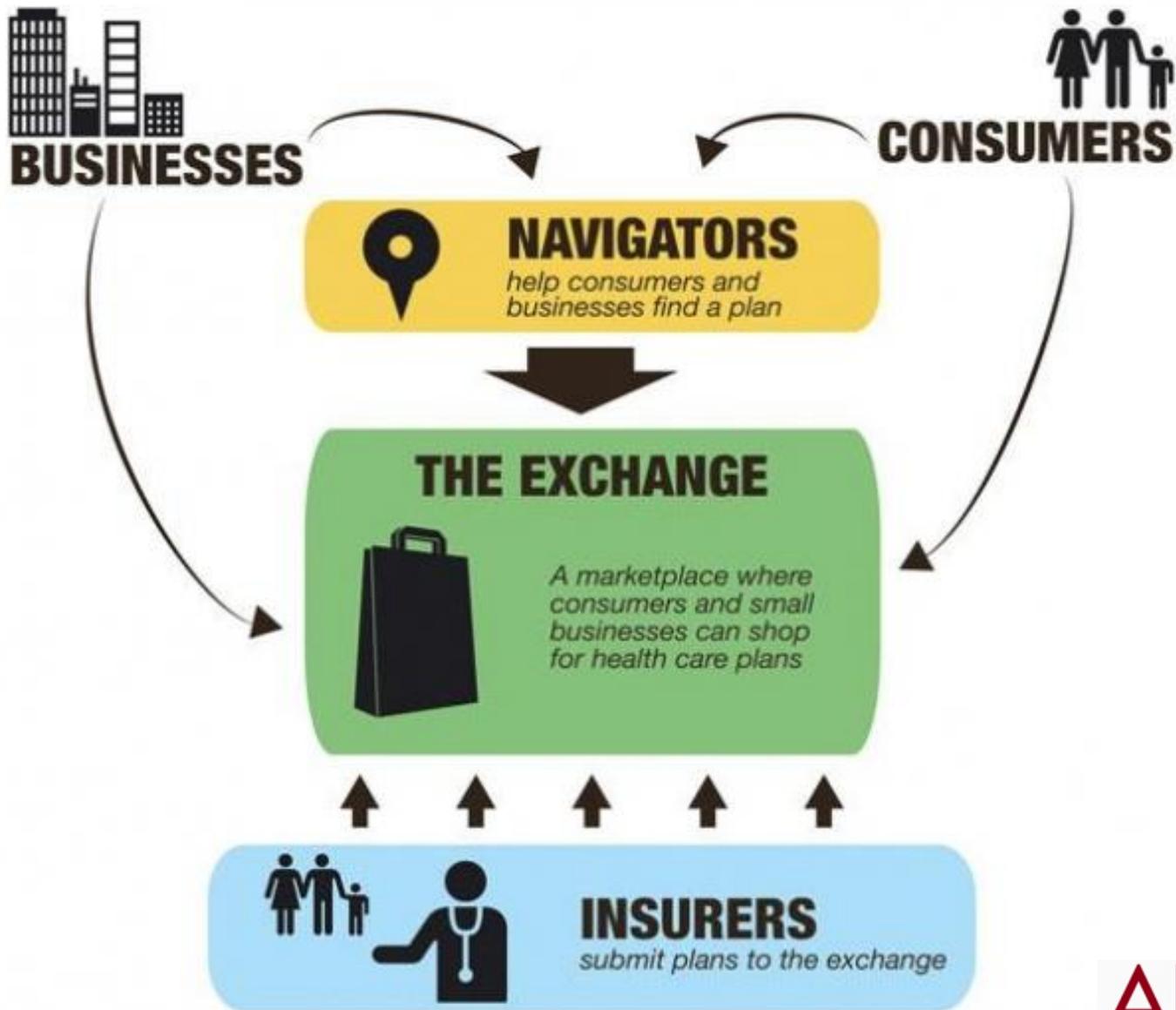
Source: U.S. Census Bureau, 2011 American Community Survey.

LEP Enrollees

- 23% of expected Exchange applicants speak a language other than English at home
- About 95% of uninsured LEP individuals <400% FPL will be income eligible for help paying for insurance

SOURCE: Kaiser Family Foundation, Profile of Health Insurance Exchange Enrollees (March 2011).

Statutory and Regulatory Requirements



Title VI of the Civil Rights Act of 1964

- “No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.” 42 U.S.C. § 2000d
- “National origin” includes individuals with limited English proficiency (LEP)

Non-discrimination (ACA § 1557)

- Extends federal civil rights laws prohibiting discrimination on basis of race, color, national origin, gender and disability to:
 - Any health program or activity receiving Federal financial assistance including credits, subsidies or contracts of insurance
 - Any program or activity administered by a federal Executive agency
 - Any entity established under Title 1 of ACA (Exchanges)
- HHS OCR has issued an RFI seeking info to assist in OCR's rulemaking

Notice Requirements

- “Plain language” requirement for health plans (ACA § 1331)
 - “The term ‘plain language’ means language that the intended audience, including individuals with limited English proficiency, can readily understand and use ...”
- Summary of Benefits and Coverage, and Uniform Glossary (ACA § 1001)
- Claims Appeals Process (ACA § 1001)

Translation Thresholds

- 2012 federal regulations adopted a threshold of “10 percent or more of the population living in the consumer’s county are literate only in the same non-English language” for language services
- **A 10% threshold leaves out millions of LEP individuals!**

	10%	5%	500
# Counties	255	565	1,284
# States	23	37	50 states plus DC, PR

Sample Summary of Benefits and Coverage (CMS/CCIIO)

Summary of Benefits and Coverage: What this Plan Covers & What it Costs Coverage Period: [See Instructions] Coverage for: _____ | Plan Type: _____

! This is only a summary. If you want more detail about your coverage and costs, you can get the complete terms in the policy or plan document at [www.\[insert\]](#) or by calling 1-800-[insert].

Important Questions	Answers	Why this Matters:
What is the overall deductible?	\$	
Are there other deductibles for specific services?	\$	
Is there an out-of-pocket limit on my expenses?	\$	
What is not included in the out-of-pocket limit?		
Is there an overall annual limit on what the plan pays?		
Does this plan use a network of providers?		
Do I need a referral to see a specialist?		
Are there services this plan doesn't cover?		

OMB Control Numbers 1545-2229, 1210-0147, and 0938-1146
Released on April 23, 2013 (corrected)

保單期限：[請參見說明]

福利和承保範圍摘要：計劃承保範圍及費用承保對象：_____ | 計劃類型：_____

! 這不是一份保單。如果您需要有關您的承保範圍和費用的詳情，可造訪 [www.\[insert\]](#) 或撥打 1-800-[insert] 獲取保單內的完整條款或保險計劃文件。

重要問題	答案	重要之因：
什麼是總自付額？	\$	
具體服務有其他的自付額嗎？	\$	
在我的費用中有自付限額嗎？	\$	
什麼不包括在自付限額中？		
保險計劃支付額是否有總年度限額？		
本計劃使用醫療服務提供者網絡嗎？		
我需要轉介才能去看專家嗎？		
本計劃是否有不承保的服務？		

OMB 控制號碼 1545-2229, 1210-0147, 和 0938-1146
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Sample Uniform Glossary (CMS/CCIIO)

Glossary of Health Coverage and Medical Terms

- This glossary has many commonly used terms, but isn't a full list. These glossary terms and definitions are intended to be educational and may be different from the terms and definitions in your plan. Some of these terms also might not have exactly the same meaning when used in your policy or plan, and in any such case, the policy or plan governs. (See your Summary of Benefits and Coverage for information on how to get a copy of your policy or plan document.)
- Bold blue** text indicates a term defined in this Glossary.
- See page 4 for an example showing how **deductibles**, **co-insurance** and **out-of-pocket limits** work together in a real life situation.

Allowed Amount

Maximum amount on which payment is based for covered health care services. This may be called "eligible expense," "payment allowance" or "negotiated rate." If your **provider** charges more than the allowed amount, you may have to pay the difference. (See **Balance Billing**.)

Appeal

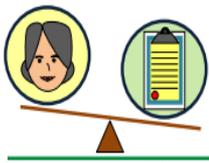
A request for your health insurer or **plan** to review a decision or a **grievance** again.

Balance Billing

When a **provider** bills you for the difference between the provider's charge and the **allowed amount**. For example, if the provider's charge is \$100 and the allowed amount is \$70, the provider may bill you for the remaining \$30. A **preferred provider** may **not** balance bill you for covered services.

Co-insurance

Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the **allowed amount** for the service



Co-payment

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

Deductible

The amount you owe for health care services your **health insurance** or **plan** covers before your health insurance or plan begins to pay. For example, if your deductible is \$1000, your plan won't pay anything until you've met your \$1000 deductible for covered health care services subject to the deductible. The deductible may not apply to all services.



Jane pays 100% Her plan pays 0%
(See page 4 for a detailed example.)

Durable Medical Equipment (DME)

Equipment and supplies ordered by a health care **provider** for everyday or extended use. Coverage for DME may include: oxygen equipment, wheelchairs, crutches or blood testing strips for diabetics.

健康承保及醫療術語表

- 本術語表包含了許多常用術語，但並不完整。這些術語及其定義的目的進行教育，可能與您的計劃的術語及定義有所不同。在您的保單或計劃中使用時，某些術語也可能有不完全相同的含義，在這種情況下，以您的保單或計劃為準。（要瞭解如何獲取您的保單或計劃文件的副本，請參閱您的福利和承保範圍摘要。）
- 黑體藍色**文字指明本術語表中定義的術語。
- 請參閱第 4 頁上範例，這個範例顯示**自付額**、**共同保險**及**自付限額**在實際生活中如何共用。

允許額

為支付承保的健康照護服務所依據的最高金額，也可能稱為「合格費用」、「允許支付額」或「協議費率」。如果您的**醫療服務提供者**收費超過允許額，您可能必須支付差額。（請參閱**差額**。）

上訴

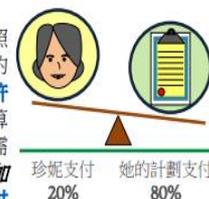
向您的健康保險公司或**計劃**提出再次審查一個決定或**申訴**的請求。

差額

醫療服務提供者按提供者的收費與**允許額**之差額向您收費。例如，如果醫療服務提供者的收費是 100 美元，但允許額是 70 美元，提供者可能會向您收取 30 美元的餘額。**首選提供者**可能**不**會就承保的服務向您收取差額。

共同保險

您為承保的健康照護服務費用分擔的份額，按服務**允許額**的百分比計算（如 20%）。您需要支付**共同保險**加**自付**

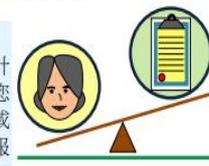


共付額

您為承保的健康照護服務所支付的固定金額（如 15 美元），通常在您接受服務時支付。此金額因承保健康照護服務的種類而異。

自付額

在您的健康保險或計劃開始支付之前，您所欠您的**健康保險**或**計劃**承保健康照護服務的金額。例如，如果您的自付額是 1000 美元，在您達到 1000 美元自付額之前，您的計劃將不會為承保的健康照護服務支付任何費用，但這些服務需受自付額的限制。自付額可能不適用於所有服務。



耐用醫療設備 (DME)

由醫療服務**提供者**為日常或延長使用所訂購的設備及用品。耐用醫療設備的承保範圍可能包括：氧氣設備、輪椅、拐杖或糖尿病患用的血液測試條。

Navigator Programs (ACA § 1311)

- Each Exchange must have a navigator program.
- ACA requires that info be provided in a “culturally and linguistically appropriate” manner.
- Regs direct exchanges to create training standards to ensure navigators are qualified to provide information “in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange, including individuals with limited English proficiency.”

What Federal resources and assistance are currently available to LEP consumers?

Individuals & Families

Small Business Owners

Welcome to the Marketplace

The Health Insurance Marketplace is a new way to get coverage that meets your needs.

Starting October 1, 2013, you can come here to fill out an application and see your plan choices. In the meantime, we can help you get ready.



CHOOSE YOUR STATE AND WE'LL TELL YOU YOUR NEXT STEPS

Hawaii

If you live in Hawaii, the Hawaii Health Connector is the Health Insurance Marketplace to serve you. Instead of HealthCare.gov, you'll use the Hawaii Health Connector website to apply for coverage, compare plans, and enroll. You can apply as early as October 1, 2013. Visit Hawaii Health Connector now to learn more.

VISIT HAWAII HEALTH CONNECTOR NOW

QUICK INFORMATION

- For the Media
- About the Affordable Care Act
- For States
- For Partners
- Regulatory and Policy Information
- For Businesses

RESOURCES IN OTHER LANGUAGES

- 中文 (Chinese)
- Kreyòl (French Creole)
- 한국어 (Korean)
- Polski (Polish)
- Português (Portuguese)
- Español (Spanish)
- tiếng Việt (Vietnamese)

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Other Language Resources

[Chinese](#)

[French](#)

[French Creole](#)

[German](#)

[Gujarati](#)

[Hindi](#)

[Korean](#)

[Polish](#)

[Portuguese](#)

[Russian](#)

[Spanish](#)

[Tagalog](#)

[Vietnamese](#)

中文

Chinese

你有權利免費用您的語言獲得幫助和資訊。要用中文與傳譯員探討健康保險市場，請致電 1-800-318-2596。

[^ Back to top](#)

Marketplace.cms.gov

The screenshot shows the homepage of the CMS.gov Health Insurance Marketplace. At the top left is the CMS.gov logo with the text "Health Insurance Marketplace" and "Centers for Medicare & Medicaid Services" below it. To the right is a search bar with the placeholder text "Type search term here" and a "Search" button. Further right is a link for "Get email updates". The main content area features a large graphic with the "Health Insurance Marketplace" logo. Below the logo, there are two paragraphs of text: "If you're a professional learning about the Marketplace and helping people apply, get the latest resources here." and "If you're a consumer ready to learn about and buy health insurance through the Marketplace, visit HealthCare.gov, the official consumer site for the Marketplace." At the bottom of this section is a dark navigation bar with three buttons: "Get official resources >", "Explore research >", and "News & events >". Below this is a "Resource spotlight" section with an image of a form titled "PLEASE COMPLETE INFORMATION" and a pencil. The text below the image says "Resource spotlight" and "New outreach materials now available." with a "Get materials >" button. To the right of the spotlight is a section titled "Looking for consumer information?" with the text "Visit HealthCare.gov, the official consumer site for the Marketplace." and a "Get consumer information >" button. Further right is a section titled "Have questions?" with the text "Find the right answers to your questions about the Marketplace." and a "Get answers >" button.

CMS.gov | Health Insurance Marketplace
Centers for Medicare & Medicaid Services

Type search term here Search

Get email updates

Health Insurance Marketplace

If you're a professional learning about the Marketplace and helping people apply, get the latest resources here.

If you're a consumer ready to learn about and buy health insurance through the Marketplace, visit HealthCare.gov, the official consumer site for the Marketplace.

Get official resources > Explore research > News & events >

Resource spotlight

New outreach materials now available.

Get materials >

Looking for consumer information?

Visit HealthCare.gov, the official consumer site for the Marketplace.

Get consumer information >

Have questions?

Find the right answers to your questions about the Marketplace.

Get answers >

[Get official resources](#)

[Explore research](#)

[News & events](#)

[Health Insurance Marketplace home](#) > [Get official resources](#) > [Other languages](#)

Materials in other languages

Arabic

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Chinese

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Creole

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Korean

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Portuguese

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Russian

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Tagalog

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Vietnamese

- [The Value of Health Insurance](#)
- [About the Marketplace](#)
- [About the Small Business Health Options Program \(SHOP\)](#)

Get the latest partner news about the Marketplace by email or text

Have questions?

Find the right answers to your questions about the Marketplace.

apiahf.org



APIAHF
ASIAN & PACIFIC ISLANDER
AMERICAN HEALTH FORUM

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

The Health Care Law and You

Luật Cải Tổ Y Tế và Quý Vị



衛生保健法與您

The Health Care Law and You

Ko e Lao 'a hono Tokangaekina'o e Mo'ui Pea Mo Koe



স্বাস্থ্য সেবা আইন এবং আপনি



HealthCare.org

Chinese (traditional), Korean, Vietnamese, Tagalog, Hindi, Bengali, Hmong, Khmer, Lao, Samoan and Tongan.

Policy Recommendations

- Translate application, website and other vital documents into at least 15 languages
- Work with your state Exchange to develop a language access plan
- Include in-language taglines on all written materials and websites
- Ensure translated materials are reviewed for quality and cultural appropriateness

Policy Recommendations

- Adopt a 5% or 500 LEP threshold for the SBC, UG and other vital documents
- Conduct in-language focus group testing of outreach and educational materials
- Ensure your state's call center and all application assisters collect and report the language needs of callers/consumers
- Conduct periodic language need assessments

Acknowledgements and Resources

- Special thanks to Mara Youdelman, Managing Attorney, National Health Law Program
- [Language Access Checklist for Marketplace Implementation](#)
- [Translation Glossaries: The Need for Standardization of ACA-related Terms](#)
- [Short Paper 6: The ACA and Application of § 1557 and Title VI of the Civil Rights Act of 1964 to the Health Insurance Exchanges](#)
- [Short Paper 5: The ACA and Language Access](#)

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